The Hampden Hippocrat

A Bulletin for the Hampden District of the Massachusetts Medical Society

VOLUME XII WINTER, 1956 No. 1

FIAT LUX UNIVERSALIS-

Just as Eos, the rosy-fingered goddess of dawn, daily pushed aside the curtains of darkness for Hippocrates and his ancient Greek world, so the clear light that the Father of Medicine kindled has been parting the curtains of ignorance and superstition ever since in the face of a veritable Iliad of human woes.

The statement that our twentieth Century has witnessed a phenomenally quickened pace in diffusion of light needs no further detailing,—nor that medical practice is not pent within national borders to the exclusion of neighbors.

No, the war on disease to be decisive should be waged in unison without hindering international politics or ideologies. Yellow fever that defeated the French efforts to dig the Panama Canal in this way is virtually extinct today, and yaws, that curse of tropical peoples is next on the schedule for complete eradication.

According to Dr. Louis A. Buie of the Mayo Clinic, "In the field of international co-operation in particular, members of the medical profession have been more than conscientious in shouldering the responsibilities implied in our (Hippocratic) system of ethics. Progress in public health improvements in medicine and the teaching of medicine, concern that the best possible care shall reach all the people — these are tangible accomplishments which most reasonable citizens in any country are able to perceive and evaluate for themselves . . . . "

Did some of our readers heed the suggestion made five years ago to read the unique story of the conquest of yaws on the atoll of Ulithi under orders of the U. S. Navy? The King of Fassarai was the title, and Macmillan the publisher. We believe that the account of this unprecedented victory of Dr. Marshall P. Wess deserves a second recommendation in this connection. What other nation in all the history of man has paused in the midst of a dangerous war to succor a native populace that had been uprooted?

This inspired physician actually rekindled in his Polynesian subjects the desire to live after they had been over-run by Spaniards, by Germans, Japanese and last by the Americans. By his skill and devoted care he wiped out the disease that had tortured them and their children for centuries. The lessons learned at Ulithi are now being applied on a world-wide scale.

The World Health Organization is no longer a dream. The World Medical Association for example, numbered representatives from 38 countries at the ninth general assembly held in Vienna last September. According to the Secretary General, our own Dr. Louis H. Bauer, "This was the best meeting yet held . . . Regardless of the places in the world from which they came, the delegates made it clear that doctors everywhere should be free to give the treatment they think is best indicated and patients should be free to choose the doctors of their choice. . .

"It is a changing world for doctors as well as others," he declared, "and if the medical profession as a whole recognizes this fact it will be able to exert more successfully the influence which it should provide because of its special knowledge of health problems".

Hampden Hippocrat

"Life is short and art is long, the occasion fleeting, experience fallacious and judgment difficult." —Hippocrates, 430 B.C.

This Issue 500 Copies

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POLIO VACCINE

To historians of medicine, April 1955 will probably be the date associated with the conquest of polio, because it was on April 12th that the vaccine was proclaimed effective. To the physicians of Mass., however, the date will always be Jan. 9, 1956, because then, at long last, the Mass. Dept. of Public Health placed its official approval on the vaccine. In between the above dates, the country has witnessed some of the most confusing, alarming, and ridiculous shenanigans since some Egyptian soothsayer announced the first cure for cancer. Now with all concerned at last agreed that the vaccine is reasonably effective and safe, let us hope that the conquest of the next major disease will be accomplished and announced in a manner consistent with the traditions and dignity of our great medical heritage.

J.A.B.

THEY ALSO SERVE WHO SIT

I wonder why they do it, the score of men who sit for long hours on hard seats and say 'Aye' or 'Nay'. A two hundred mile drive or more, a day of shifted appointments, of family adjustments, just to sit, listen, and cast a seemingly inconsequential vote. But they do this in the Fall, Winter, and the Spring, these councillors for the Massachusetts Medical Society who represent us in Boston at those stated meetings. A few of these men will speak on questions. Woe to him who knows little of his subject though. For some five hours, with a luncheon break, these elected doctors represent their fellows living in our district. One wonders at their patience and their responsibility, these local councillors from the Hampden District.

Then there are the score of state committee members who throughout the year dutifully carry on their state meeting assignments. Many more constitute the local district committees. This is the Massachusetts Medical Society at work.

The practice of medicine in and out of the hospital, does not just go along uncharted. Only by the dedication of a few of the many does the care of the sick continue in an orderly manner. Only by the studied reaction to constantly changing social and medical problems can we pass on from those from whom we received the light of the torch a truly better and more effective concept of our mission. Patience, diligence, understanding and intellectual honesty may take time from more active or remunerative hours, but when the time comes that men no longer have the will to serve unselfishly, it may be too late to save our usefulness to others or our own professional independence.

So although the seats be hard, the subjects trying — one can always carry a cushion! — or petition Dr. Cotting next time to provide ethyl spirits! CRAW-

COMPLIMENTS
T. P. Sampson
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SPRINGFIELD

BETTER LIBRARY SERVICE

President Arthur W. Allen reports to the Hippocrat that Dr. Henry Viets has filled in as Acting Director of the Boston Medical Library very well and that he is cleaning up the backlog of problems left by the late Director Ballard. "We are still short-handed" he wrote "but now we have enough money in prospect to employ one additional assistant librarian . . .One of the chief criticisms from members of the Massachusetts Medical Society arose from the necessity of paying postage on material that was returned to the library. We now can pay the postage in both directions".

Dr. Allen also stated that microfilming seems to be of interest to everyone. At present the Harvard Library has been good enough to supply this need. The Medical Library does not own such apparatus nor is anyone on the staff able to operate it. Perhaps this will be possible in time.

"I am terribly interested" he continued "in trying to meet the needs of members of the Library. The question of slow service has always been a bad feature since it takes time to get the books out and get them ready for delivery. It requires a considerable amount of effort on the part of our over-worked staff, but we are trying to improve this situation and I hope we can."

Already there is improvement in this last item because the new stacks are installed and the book elevator as well. The physical improvement of the Library will be completed when the new passenger elevator is installed. However, the institution stands in need of endowment funds to permit service to go on and to grow to meet future demands. Remember, 'Where there's a will . . .'! The co-operation and

(Continued on Page 7)

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FRANKLINSENSE

The Archangel Gabriel was busier than usual on the morning of April 18th, 1790, indistinguishable though it was in never-ending salubrity from those that had gone before. He wiped a crumb of manna from his lips on the sleeve of his long white robe, and shook the last pearly drops of heavenly dew from his greater wing coverts. Rapidly the 'Archy' thumbed through the morning's sheaf of passports for admission to Paradise which Raphael had sorted for him. Through the lodge window he eyed ten thousand times ten thousand as they milled about, eager to view the new arrivals,—much as earthly villagers troop to meet the nine-fifteen.

The archangelic thumb paused when nearly through the F's. Like a wisp of morning mist across the face of the sun, the merest suggestion of a frown clouded Gabriel's luminous brow.

"Another knotty problem on our hands?," inquired Raphael.

"Verily, I fear we have", answered the heavenly deputy. "It seems a mortal died last night of a ruptured empyema. Though many diverse sponsors signed themselves to this petition with esteem and commendation, the Censor has red-inked "Infidel" across the face in a firm, unmistable hand. Be a good angel Rafe, and bring me Ben Franklin's data from the files of the Book of Life. You'll find them in the British Colonial stacks among the North American documents."

And we, his more-than-fortunate posterity who now, one hundred and sixty-six years later, might easily have drained that pleural cavity and dispersed the unlaudable pus to extend his life for years more of usefulness, may properly judge the true worth of our wonderful Uncle Benjamin. We are enjoying the fruits of his untiring efforts to make life more liveable for one and all.

Today the Franklin stoves and rocking chairs may be relegated for the most part to rural cabins, but the majority of us will need Ben's bi-focal glasses to read modern letters to the editors like those he invented for himself — also the almanacs. And to him we owe the untold benefit of electricity. What a collection of firsts he amassed; the first hospital, the first police force, the first municipal fire department, the first public library — but above all, our splendid republic that has established so many precedents in the attainment of liberty — liberty to live, to speak and to worship as we choose. Without Franklin's great patience, his unswerving purpose and his skillful diplomacy we might still be an overgrown colony!

It is true that 'Poor Richard', as he named himself, never joined any orthodox church. Neither did Abraham Lincoln in his day, but both men fundamentally were religious and devoted their lives to the greatest good of their fellow citizens and of the unique country that they helped to establish and to preserve. Uncle Ben also built a tabernacle in Philadelphia where all religions might be taught, specifically for the Evangelist Whitfield when orthodox pulpits were closed to him.

As we celebrate the 250th anniversary of Benjamin Franklin's birth, we may speculate on the decision of the two Archangels guarding the Pearly Gates.

"At the end of his long and crowded life", concluded Gabriel, "When he had spent his health and strength in the service of his fellow men, it is recorded that Franklin bared his soul to President Ezra Stiles of Yale with characteristic candor: 'Here is my creed: I believe in

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one God, Creator of the Universe. That He governs it by his Providence. That he ought to be worshipped. That the most acceptable service we can render him is doing good to his other children. That the soul of man is immortal, and will be treated with justice in another life respecting its conduct in this. I do not dogmatize (upon questions I do not know) . . . . when I expect soon an opportunity of knowing the truth . . . . "

"St. Peter will be sure to seize upon that", exclaimed Raphael — The man reminds me of Socrates,—"

"I believe you have fallen in love with Benjamin Franklin," said Gabriel.

"I confess I think well of him myself!"

In the silence that followed the sound of halleluiahs rose to a glorious climax.

"I shall cast my ballot for the admission to a just reward of the soul of this good and faithful servant," exclaimed Raphael.

Some moments passed before Gabriel answered. "He was confident, I am sure, that all would be well when his eyes should be opened. I'm with you Rafe. However, you must remember that the Ancient of Days Himself must decide!"

(With thanks to Carl Van Doren, Garry Moore et al.) E.P.B.

FLIGHTY

We learn from Secretary Lull that more than 56 physicians piloted their own planes to the annual meeting of the A.M.A. at Atlantic City last June. (Ask Dr. E. Halton of Holyoke!) Scarcely less startling was the full-color movie among the forty medical films shown at the meeting showing the actual flight of an ovum **in situ** from ovary to uterus!

HOT FLASHES

Dr. Frank Sirulnik of Springfield was elected President of the American Physicians' Art Association. Congratulations!

Jim Faulkner of Boston succeeded himself on the A.M.A. Council on Medical Education and Hospitals. Ditto!

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OUR RESPONSIBILITY

Every person, regardless of how great or small his impress on the world scene, leaves behind two permanent records, namely, his birth and death certificates. Paradoxically, we in the medical profession, who find all paper work so repugnant, are primarily responsible for the creation of these two records as well as their quality. Over and above their various utilitarian uses these records serve as a history of the impact of medicine on the lives of the people.

In this country the legal authority for registration rests with the state government; however, national birth and death data become possible because a standard record form is developed by the United States Public Health Service in cooperation with state registration officials and representatives of health and demographic interests. The first standard certificates were promulgated in 1900 with the sixth coming into general use beginning January 1, 1956.

The basic information requested on these certificates has not changed much in the half-century of their use. Proposals for the collection of additional information are screened rigorously in the process of decennial revisions, and only those of broad general value survive to become part of a legal document. Few changes have been made in the 1956 revision of the death certificate to keep same up-to-date and to keep the collection of information accurate rather than to introduce any real innovations. On the death certificate of Massachusetts the medical certificate section has been revised only slightly. The principle of reporting a sequence of causes that led to death, reporting the underlying cause last, is the same, but the instructions shown on the certificate have been slightly simplified. The items requesting date of operation and major findings of operation have been deleted because significant findings of operations are correctly reported in the cause of death sequence or as contributory causes.

There is much confusion amongst some physicians as to what the cause of death sequence system means; therefore, it may be profitable to review same. In the cause of death section, information regarding the "immediate cause" of death is first requested. The "immediate cause" of death should be reported as the terminal disease. Next, antecedent conditions that gave rise to the "immediate cause" should be stated with the "underlying cause" of death being stated last in the sequence of events. The "underlying cause" is the one used for routine statistical tabulations of cause of death and not the "immediate cause". For example, a female who is admitted to a hospital with a strangulated hernia and dies of acute peritonitis three days later might be reported as follows:

Immediate cause:	(a) Acute Peritonitis
Due to:	(a) Perforation of small intestine
Due to:	(c) Strangulated femoral hernia

"Strangulated femoral hernia" is the "underlying cause" which started the whole sequence of morbid events leading to death. It should be reported last and is the condition used in compiling basic mortality statistics.

This procedure, which has been adopted internationally at the recommendation of the World Health Organization in 1949, is intended to ask the attending physician to certify the cause of death in such a manner that he, and not some clerk

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working under some arbitrarily set rules, selects the cause of death for statistical tabulations. Even though the new procedure has been in effect for seven years, it is estimated that one fifth of death certificates are still improperly made out.

Therefore, certain general rules have been established to classify inadequate certifications as if they had been reported in correct sequence. However, no rule can result in statistics that are as reliable as those compiled from carefully and correctly reported data of the attending physician who, after all, is in the best position to determine the cause of death. Those physicians desiring more information regarding the making out of death certificates may refer to the publication entitled "Physician's Handbook on Death and Birth Regulations" as issued by the United States Public Health Service.

The newly revised standard certificates of death may now be procured from the offices of local health departments or boards of health. J.C.A.

POISON PREVENTION

During the week of September 11th through the 17th, the Hampden District Medical Society in co-operation with the druggists' associations of Hampden County staged a Child Safety Campaign to stress to the public the importance of accident prevention, with particular emphasis on the prevention of poisoning in children. During the following week, a booth at the Eastern States Exposition displayed educational material and supplied information to the public regarding child safety.

The public response to the campaign was most gratifying and as a public relations venture, the campaign was very valuable both to the medical profession and to the druggists.

It is particularly pleasing to note the splendid spirit of cooperation shown by organizations and individuals both inside and outside the groups most intimately involved. The Massachusetts Medical Society defrayed the rental cost of the booth which was decorated through the generosity of John H. Breck, Inc. and manned by the druggists. Mr. Paul Flannery donated the drawing used on the posters. The Massachusetts Mutual Life Insurance Company provided several thousand infomative booklets for distribution. The newspapers, the radio and television stations were most helpful in the field of publicity.

The Public Relations Committee and the officers of the Society wish to express their thanks and appreciation to all who aided in making this experiment in public relations a success.

Howard N. Simpson, *Chairman*

(LIBRARY SERVICE - from page 3) support of each fellow is vital and very much appreciated.

We all are indebted to these men, particularly Dr. Allen for giving so much time and thought to the important project of maintaining reference material adequate to meet the needs of one of the world's great centers of medical research.

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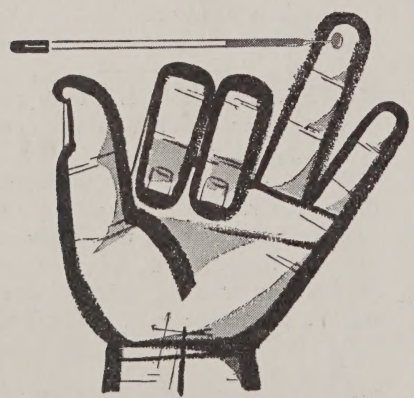
HEALTH FORUMS; AN APPRAISAL

It is difficult to write about our recent Health Forums without waxing enthusiastic. The size of the audience surpassed even the most optimistic expectations. A total of no less than four thousand people attended the four weekly panels which began November 15, 1955. The applause was loud and resounding, and requests for more and more Forums even now are still pouring in. (A complete listing of the program and the joint committee on Medical Forums appeared in the Fall issue of the Hippocrat.)

The first objective of these Forums was to disseminate authentic medical knowledge to the laity, the idea being that if we don't inform, others may misinform. The second objective was to improve public relations which as everybody agrees, is much desired at the moment. Since 1952 Forums of this type have been held in many communities throughout the United States, the one notable exception being this area. As far as is known ours is the first District Society to sponsor such a series in Massachusetts, and in fact in all of New England. It is reasonable to predict that other localities will soon follow suit.

In introducing the first panel President Derby pointed out that organized medicine was very happy of the opportunity to render this important public service. He expressed also a sincere hope that the Forums might serve to dispel some of the false and unfounded fears surrounding today disease and sickness. President-elect Holleran introduced the third panel and took the occasion to emphasize, what apparently was not generally known, that the participating physicians did not volunteer their services, but rather were drafted for the job. That more Forums will be held in the future is almost a foregone conclusion. This means that many more doctors will be "drafted" to organize and to participate in these forthcoming panels.



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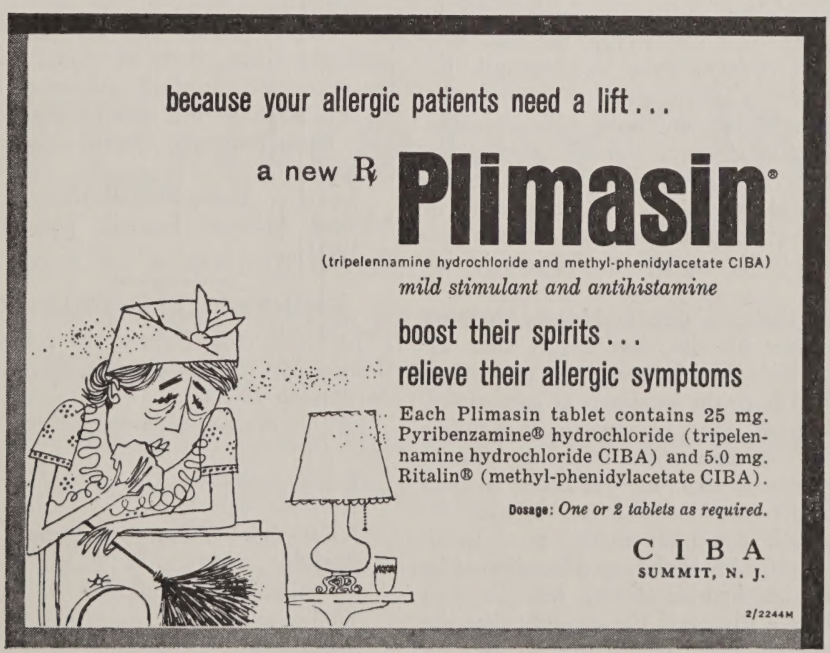
The only criticism heard came from a handful of people, all interestingly enough, members of our own profession. This was more or less to be expected. The Forums after all were a radical departure from anything we have ever had here in the past. Moreover, they involved publicity, a thing we have all been brought up to shun as much as possible. It can now be told that the twenty five panelists all resisted as long as they could pressure from the publicity department to pose for the photographer. It should be added also that the conduct of our participating physicians was in all respects ethical and exemplary, and that they were always a credit to the profession which they represented.

A tremendous amount of work and innumerable meetings by many people went into the making of these Forums. The guidance and counsel received from the American Medical Association proved very helpful, based as it was on actual Forum experience in other communities. Our co-sponsors, The Springfield Academy of Medicine and The Springfield Newspapers cooperated splendidly, and a number of members of our Women's Auxiliary lent their active support by distributing posters and by serving as usherettes. Special thanks are due the several Druggist Associations of Hampden County for displaying posters and for distributing leaflets. Chief credits, however, go to President Derby for his inspiring leadership; to Mr. Paul Craig for his excellent publicity and newspaper support; and last but not least to our own indefatigable Public Relations Chairman Dr. Thomas F. Reilly for his hard work, and for his skill in organizing and handling committee men. It is safe to state that without the combined effort of these gentlemen success would have been totally impossible. M.M.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Dear Hippocrat:

Today's problems are so varied and complex that there will be continued need for clear thinking and the services of men of maturity. From experience recently gained and after much thought. I am prompted to venture a few suggestions for consideration and discussion to be broadcast by you as MC if you will be so kind.

Young men must show interest in the deliberations of the Society and contribute their time and their philosophy in every effort to solve the various problems that beset the medical profession. I realize that the position in which they may often find themselves, prevents freedom of expression and freedom to dissent and disagree, but after all they must face the future realistically and realize that medicine as we have known and enjoyed its benefits is definitely in their hands.

I further believe that the office should seek the man instead of the reverse and that all appointments be made on the basis of ability and willingness to serve faithfully and impartially. In that way we will develop unity and strength for whatever battles are ahead to preserve the ideals of a free and independent practice without unnecessary controls or coersion. Contrary opinions are the soul of democracy, and no society big or small will survive if conformity thru pressures prevails and the courage to disagree is stifled.

The author Cameron Hawley, looking back over his life, saw clearly that the things of which he was least proud had resulted from the weakness of conformity, from being more concerned with pleasing others than with satisfying himself. He declared that his successes resulted from the sustained courage "to walk his own path across the earth", an admonition given him by his grandmother as he sat by her bedside during her last days while she discussed the changes that she considered most significant during her lifetime.

"When I was a girl", said she, "there were so many men who stood out as individuals. Now there are so few. More and more, it seems, men are yielding to some terrible compulsion to conform, to think alike and talk alike. In those days you could recognize any man who was worth knowing as far away as you could see him or hear the sound of his voice. Believe me, no one ever mistook your grandfather for someone else. He was always his own man, thinking with his own mind, standing on his own feet. He knew that a man finds happiness only by walking 'his own path across the earth' ".

Let me too, pass on to my fellow-members of the Hampden District this formula for a full and satisfying life:

"Walk your own path across the earth".

With thanks for such splendid cooperation with your current officers, Joseph P. Derby, President.

BUIE'S BOQUET

Hippocrates lived in the fourth century before Christ, but the pattern of principles which bears his name remains the prime feature of all systems of medical ethics. From the standpoint of integrity, none has ever improved on these principles.*

Louis A. Buie, M.D.-Rochester, N. Y.
*World Medical Journal, Jan. 1956—p. 12-13.

EPONYMICALLY SPEAKING

(Thanks to the Bulletin of the Pierce County Medical Society, Tacoma, Wash., November, 1955.)

Just in K's someone should ask, what are,

Kaposi's disease ?
Kernig's sign ?
Kimmelstiel-Wilson syndrome ?
Koplik's spots ?
Korsakoff's Psychosis ?
Kreb's cycle ?
Krunkenberg's tumor ?
Kupffer's cells ?
Kussmaul's respiration ?

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Veterans Administration Under Fire

The one section of the Hoover report on Government waste which is of special interest to doctors, is that which deals with the overbuilding of Federal hospitals with the result that there are thousands of empty beds. The report recommends that certain of these hospitals be closed as no longer possible to operate economically and that no new ones be built except those already in process of construction; and it further suggests that in view of the great need of more hospital beds for civilian use, it might be possible to transfer some of these surplus hospitals to private use.

This was not received kindly or gracefully by the VA, in fact the Commission was told that the facts submitted were not accurate, and the upshot of it is that the VA is going right ahead with hospital building and asking for more funds.

We all know about these hospitals, that they are marvellously equipped, fully staffed, adequately serviced in every respect with better pay than any community can offer its personnel, no overcrowding, no waiting for beds, no shortage of nurses, and the patient isn't pushed out until he is ready to go.

One of the reasons given for the increase in VA hospitals is the law passed in 1933 permitting free hospital care to the indigent veterans for non-service connected-disabilities, and at last reports more than 50% of the veterans in these hospitals were there for disabilities which had nothing to do with their war service, the cost of which is estimated as approximately 500 million dollars annually. Although the VA insists that none of these could afford to pay for their care, there is considerable reason to doubt if any real effort were made to look into their financial status.

There is certainly need for revaluing the debt owed the veterans. If injured in the service they must be amply compensated until rehabilitated, and normal earning power restored; if permanently disabled no expense should be spared to enable them to live in comfortable surroundings and with adequate care. But for the Federal government to assume the responsibility for the health of all the veterans, is to eliminate from the doctor's practice a potential source of income, and to persist in new hospital construction which siphons off nurses and other personnel from civilian hospitals, is a prime example of Federal waste and extravagance.

We have often wondered if it wouldn't be a practical thing for the Government to give every veteran in active service a Blue Cross and Shield contract plus prolonged illness certificate, in place of the many other prerequisites, thus automatically reducing the need for general V.A. hospitals and placing the care of the veteran where it belongs, in his own community, where he lives. Considering the fact that we have more than 21 million veterans the activities of the Veterans Administration are certainly due for what Mr. Dulles calls "An Agonizing Reappraisal".

E.C.D.

MEDICAL READER

Dr. Andreas E. Laszlo of Southport, Conn., carries on where Dr. Haggard left off in 'Devils, Drugs and Doctors'. 'Doctors, Drums and Dances' brings from the depth of primitive Angola exciting adventures and strange rituals of little known African tribes. Researth on native medicines is presented with observations on mass hypnotism and therapy according to Mesmer. Also included are 32 pages of photographs that astonished even the author. Hanover House the publisher recommends the volume at $4.50, and report that Dr. Laszlo "finds gratification in the response of the reading public to the sincerety that he sought to inject into his work". We, who are in fact related to the author by marriage, can testify to his versatility and the fact that African safaring has not changed him much. The further fact that we have not read the tome is without prejudice and due solely to the final fact that as yet 'Bondi' has not sent on a copy. The power of suggestion in our case did not work.

B.

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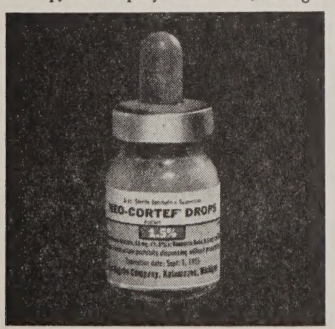

NO BARGAINS

For those in medicine most interested in the medical-economic views of patients and observant of the trends, both nationally and locally, a few view points seem worthy of consideration.

Many patients feel the cost of medical care is too great and few would object to its being reduced to a minimum by whatever means.

Because the doctor plots the course, he is often blamed, though his own fee may be but a small fraction of the total cost.

It is felt that most doctors are in the $40,000. income class and the appearances of success, such as expensive cars and elaborate offices formerly considered an asset, now may be a liability as far as public opinion is concerned.

Families, noting their inflated dollars disappear by inflated non-pleasurable medcal expense are seeking ways of getting it "wholesale" and not without some apparent success. Apparent because in such an individualized service as medical care, someone has to pay the difference, be it the tax payer, a charitable organization, or the doctor's pocket.

With employment and wages at an all-time high, some philosophy presages ill for leaner times.

This is an educational chore for the individual doctor.

We must ask patients their financial status, so we may guide them as though their problems were our own.

They should know, in spite of appearances, most doctors earn but a moderate income, especially when one considers their short productive years.

Advise them that the government can not give them cheap medicine, but poorer medical care at a greater hidden cost.

That clinics supported by public funds are costing someone about as much, or more than private care would be.

Physicians have been tardy in recognizing the efforts being made to streamline medicine on a mass production basis by having a doctor "front" for workers with a smattering of medical patter, and openly in competition with physicians, except for their night, or emergency calls. This has been called by some the back door to state medicine.

Let us keep our house and the community in order for the health of the community is ultimately the doctor's responsibility.

Properly organized united and vocal, we can and must insist that our patients receive nothing but the best in medical care.

We must awaken to the times and practices and through our medical society vigorously oppose any threat to the health of our community. J.A.W.

WANDERLUSTFUL?

Treat yourself to a week or two in Hawaii in the springtime, why don't you?

That's an invitation it's a pleasure to pass along. It comes from the Hawaii Medical Association, whose members are celebrating their organization's Hundredth Anniversary this coming April 22 to 29 in proper "Hawaiian" as well as medical fashion. There will be a short but worthwhile professional program on Monday and Tuesday mornings, a spectacular Centennial Celebration Pageant Tuesday night, and a traditional **luau** (Hawaiian feast to you Easterners) Thursday night, with Polynesian entertainment.

This is the best time of the year to visit America's island paradise — clear, balmy days and cool, refreshing nights; spring flowers in profusion on the ground and in the trees; lovely island maidens— but you have the idea now, surely. Hawaii in the spring is always alluring. This is your chance to tie it into a professional meeting. The affair follows the American College of Physician's session in Los Angeles, too. Write the Hawaii Medical Association, 510 South Berestania St., Honolulu 13, Hawaii, for reservations and application forms.

Dont forget M.M.S. dues if paid before March 1st come back to the Hampden District in part. Otherwise there is no rebate. Allen Rice, Sec.

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for infants and children

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MEDICAL READER

TOO TRUMAN

According to his confessions, soon to be published at a handsome figure and distributed widely by the Book-of-the-Month Club, the retired porch-sitter from Missouri declared in a recent issue of Life magazine his bitterest pill to have been the defeat by you and me collectively of his compulsory health insurance,—well no, not you and me perhaps, but selfish people, the leaders of the A. M. A. and other "politicians who fought . . . every proposal we made to improve the people's health". He wanted no part, though, he said, of socialized medicine! If you want the whole story, it will cost you five dollars for the current volume, "Years of Trial and Hope", (Doubleday Co.) E.B.

* * * * *

Another book, though legibly printed, attractively illustrated and neatly bound', according to the reviewers of the A.M.A., is much less solid than the Truman opus, in fact, 'Arthritis and Common Sense' by Dan Dale Alexander "is based on a profound ignorance of Chemistry, anatomy and physiology". A pure chemical substance, for example, can not be concentrated further, joint cavities contain no oil, nor do muscles need oil for lubrication. The author, "a former technician employed by the Veterans Administration, is not a Doctor of Medicine". Dr. H. H. Kirschner who wrote the introduction, was graduated from Jefferson Medical College in 1902. A photostatic copy of a clipping from the Long Beach (Cal.) Independent of May 2, 1955 quotes his advocacy of carrot juice as the "best prescription for cancer, tuberculosis and leukemia . . . Waving a gallon jug of the golden fluid, Dr. Kirschner expounded his theories during a symposium which closed the three day sessions of the American Academy of Nutrition". This information was forwarded from the AMA files in Chicago in response to our request. M. M.

There is no law in the State of Massachusetts that prohibits a man from proclaiming that black is white, or that the moon is made of green cheese. This unfortunately holds true even when life and health are at stake, which explains in large measure why quackery, is still rampant in our midst. A case in point is a piece of drivel in the form of a book entitled "Arthritis and Common Sense", (Witkower Press, Inc., Hartford, Connecticut) written by a former medical technician by the name of Dan Dale Alexander, with a foreword by a Dr. H. E. Kirschner of California, a student of the late Bernarr McFadden.

The "arthritis cure", (cod liver oil and diet) promulgated in this book is too ridiculous to even warrant comment. Suffice it to say that according to a report from the Bureau of Investigation of the American Medical Association, the book ". . . is based on a profound ignorance of chemistry, anatomy and physiology". The report then proceeds to illustrate this with a few relevant excerpts, and concludes by saying that the author has read a great deal and ". . . . has learned to throw polysyllables around as if he understood them . . . . " It seems also that both the author and Dr. Kirschner are no newcomers to the promotion game. Alexander peddled an "arthritis cure" as far back as 1947, and Dr. Kirschner has been commercializing on food faddism for some time, his most recent venture being the carrot juice "cure" for cancer, tuberculosis and leukemia.

The book, "Arthritis and Common Sense" is camouflaged with enough high sounding technical terminology to impress the unwary, and to exploit the gullible at the rate of $3.95 per copy. Advertising via newspapers and television has been intensive, and business apparently has been very good. No less than thirteen printings, it is claimed, have been published to date.

What is the physician's duty in the face of such humbug? What can he individually do about it? He can, and should, ex-

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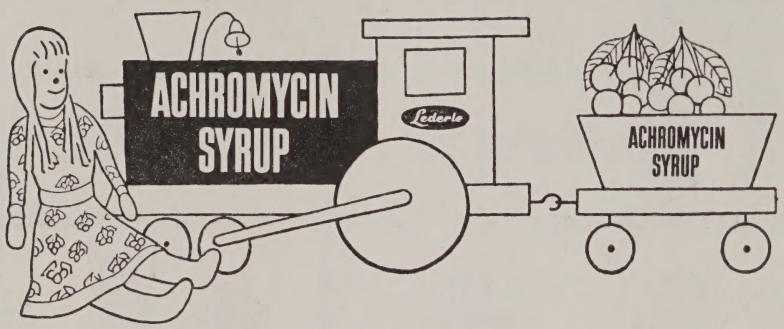

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MEDICAL READER (from page 16)
pose it for what it is to the public as well as to the profession. He can, and should, explain the truth to every patient who is willing to listen. Most of all he should at all times cooperate with his District and State Societies in their fight against medical charlatanry whenever, and wherever it rears its ugly head. M.M.

ANSWERS TO EPONYMS

(Questions on Page 10)

KAPOSI'S DISEASE: Named after Moritz K. Kaposi, the Austrian dermatologist, who, in 1872, noted this rather rare hemorrhagic sarcoma of the skin.

KERNIG'S SIGN: The Russian neurologist Vladimir Kernig, who died in 1917, described the pain-producing movement, observed in meningitis, of flexion of the thigh at the hip with simultaneous extension of the knee.

KIMMELSTIEL-WILSON SYNDROME: An eponym for intercapillary glomerular sclerosis, a nephrosis-like syndrome found in diabetes, described by two contemporary physicians in Am. F. Path., 12;83, 1936.

KOPLIK'S SPOTS: Small bluish-white spots on the mucous membranes of the mouth, seen in the prodromal stage of measles; first noted in 1898 by the American physician Henry Koplik.

KORSAKOFF'S PSYCHOSIS: Named after Sergei S. Korsakoff (1854-1900), this organic reaction is characterized by gross memory defects and confabulation and is seen frequently, but not exclusively, in alcoholism.

KREBS CYCLE: The tricarboxylic acid cycle in which the fundamental process of cellular energy occurs; named after the recent Nobel prize laureate, Hans Adolf Krebs, now in England.

KRUKENBERG'S TUMOR: A malignant ovarian tumor, usually secondary to gastro-intestinal carcinoma, noted by Friedrich E. Krukenberg, a German pathologist (1871-1946).

KUPFFER'S ELLS: In 1876, the German anatomist Karl Wilhelm von Kupffer observed reticulo-endothelial cells in the walls of the sinusoids of the liver.

KUSSMAUL'S RESPIRATION: Adolf Kussmaul (1822-1902), who also developed the technic of gastric lavage, described the "air hunger" of diabetic coma.

PERSONALS

Letter under date of Sept. 23, 1789, (a few months before his death), to B. Franklin from G. Washington, "If to be venerated for benevolence, if to be admired for talents, if to be esteemed for patriotism, if to be beloved for philanthropy, can gratify the human mind, you must have the pleasing consolation to know that you have not lived in vain."

Letter under date of January 9, 1956 from 3 the Precincts, Canterbury. "Dear Hippocrat, You are sure to know that Dr. and Mrs. Edgelow were over here last summer, and to my great pleasure came to Canterbury on August Bank Holiday. Before they came to me they had tried to get a room, not realizing how packed with visitors Canterbury is during the summer months, but I was able to get them a wonderfully nice room in a hotel in a charming village, formerly with a Mayor, only two miles from Canterbury. It was such a pleasure to see them and hear all the news. Most sincerely, Margaret Babington, O. B. E.. Hon. Steward and Treasurer, Friends of Canterbury.

HOT FLASH

Another illusion gone! No, it was no ingenious Yankee who invented the bath tub,-not even a Russian, but some ancient Greek or one of his slaves three hundred years ago. One recently was found near Pylos in the ancient palace of the heroic King Nestor. Dr. Carl Blegen of the University of Cincinnati reported a drinking cup was found on the floor of the tub, indicating to him that the royal habit was to drink while dunking. Has our absent-minded professor forgotten so soon those horrible days of bathtub hooch during Prohibition?

Sc. N. Letter, Jan. 21/56

TOBACCO ROAD

Cancer is not the only lung disease traceable to smoking according the research workers of Mass. Memorial Hospitals. Chronic obstructive emphysema for example was found in forty men, aged forty, who previously had shown no unusual lung symptoms. All were heavy cigarette smokers.

Another communication in the Sc. N. L. suggests that doctors give up smoking as good examples. Who will take this road?

Significant Clinical Conference
Feb. 28, 29, March 1, 2, 1956
Palmer House, Chicago

The Annual Clinical Conference of the Chicago Medical Society will again present a distinguished program planned to bring the physician new resources to meet the problems of everyday practice. Designed to help both general practitioner and specialist, the Conference offers lectures, panel discussions, teaching demonstrations and question and answer periods.

A faculty of thirty of the nation's foremost medical authorities and educators will present timely lectures on a variety of subjects of direct practical interest. Other groups will participate in panel discussions and a clinicopathologic conference. Included is a series of the highly popular teaching demonstrations. An innovation for this Conference will be Question and Answer periods designed to be of greatest help to those in attendance.

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Pays You For — Total disability, if incurred before age 60, per mo. for 24 mo. $400
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